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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted with Initial  
Filing  
OR  
☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	IMP 1653-002
First Named Inventor	C. Roberts
COMPLETE IF KNOWN	
Application Number	09,960,076
Filing Date	Sept. 19, 2001
Group Art Unit	1771
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PUFF HEAT TRANSFER**

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 09/21/2001 as United States Application Number or PCT International

Application Number 09/960,076 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:

Custom r Number  
or Bar Code Label

Correspondence address below

**08698**

PATENT . TRADEMARK OFFICE

Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1 001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR



A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Christopher

Family Name

or Surname Roberts

Inventor's

Signature

Date

9-27-01

Residence: City Blacklick

state Ohio

Country USA

Citizenship USA

Mailing Address 170 Bristol Street

Mailing Address

City Pickerington

State Ohio

ZIP 43137

Country USA

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Lawrence

Family Name

or Surname Levine

Inventor's

Signature

Date

9-26-01

Residence: City Blacklick

State Ohio

Country USA

Citizenship USA

Mailing Address 7881 Creek Hollow Road

Mailing Address

City Blacklick

State Ohio

ZIP 43004

Country USA

☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/960,076
Filing Date	September 19, 2001
First Named Inventor	C. Roberts
Group Art Unit	1771
Examiner Name	
Attorney Docket Number	IMP 1653-002

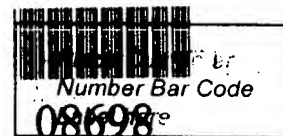
I hereby appoint:

☒ Practitioners at Customer Number

08698

OR

☐ Practitioner(s) named below:



PATENT, TRADEMARK OFFICE

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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<input type="checkbox"/> Firm or Individual Name				
Address				
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Country				
Telephone		Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

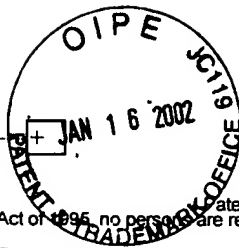
Name	Lawrence M. Levine
Signature	
Date	9-26-01

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.\*

☐ \*Total of \_\_\_\_\_ forms are submitted.

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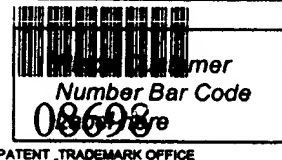
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☒ Practitioners at Customer Number

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Name	Registration Number

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	Christopher A. Roberts
Signature	
Date	9-27-01

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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